| Form RD 410-4<br>(Rev. 7-98)  |  |                     |                               | osition 3       |                                 |                  |                                  |              | m App                 | roved<br>0575-0172                   | ,         |
|---|--|---------------------|-------------------------------|-----------------|---------------------------------|------------------|----------------------------------|--------------|-----------------------|--------------------------------------|-----------|
|   | APPL                                       | ICATION F           | OR RURAL                      | ASSISTAN        | ICE (NONF                       | ARMTRA           | CT)                              | CIV          | J , 10.               | 0010-0112                            | ·         |
|   | Unifo                                      | orm Re              | sident                        | ial Lo          | an Ap                           | plicat           | ion                              |              |                       |                                      |           |
| This application is designed t  | be completed by the                        | e applicant with t  | he lender's assista           | nce Annlicante  | ebould complet                  | a this form on " | A                                | " or "Annli  | noot #2"              | on englisable                        | -         |
| Al Applicants must provide in<br>spouse) will be used as a bas                                  | normation (and the i                       | appropriate box     | checked) when L               | the income      | or assets of a                  | nerson other th  | on the 'Ann                      | licant " (in | و محتامه دام          | ha Anallaania                        |           |
| must be considered because  | the Applicant resides                      | sin a community :   | property state, the           | secunty proper  | ty is located in a              | community pro    | os for loan of<br>perty state, o | or the Appl  | cantis r              | or her liabilities<br>Hying on other | r         |
| property located in a commun  | ity property state as                      |                     | ment of the loan. E OF MORTGA | GE AND TE       | NS OF LOA                       | N                |                                  |              |                       |                                      | -         |
| Mortgage V.A. [   | Conventional                               | Other:              |                               | Agency Case     |                                 |                  | Lender Ac                        | count Nun    | ber                   |                                      |           |
| Amount FAA  | USDA Interest Rate                         | No. of Month        | s Amortization                | Fixed F         | late                            | Other (Explain   | ).                               |              |                       |                                      |           |
| \$  |  | %                   | Туре:                         | ☐ GPM           |                                 | ARM (Type):      | •                                |              |                       |                                      |           |
| Subject Property Address (Si  | reel, City, State, ZIP                     |                     | TY INFORMAT                   | ON AND PL       | JRPOSE OF                       | LOAN             |                                  |              |                       | No of the                            |           |
|   |  |                     |                               |                 |                                 |                  |                                  |              |                       | No. of Units                         |           |
| Legal Description of Subject  | roperty (Attach des                        | ecription if necess | ary)                          |                 |                                 |                  |                                  |              | Ye                    | ar Built                             |           |
| Purpose of Loar   | Purchase                                   | Construction        |                               | Other (Expla    | in):                            | Property         | will be                          |              | Щ.                    |                                      | ,         |
|   | Refinance                                  | Construction-F      | ermanent                      | , Dates (Expla  | · · · ·                         | Pr               | imary<br>sidence                 | Second       | ary                   | Investment                           |           |
| Complete this line if construc<br>Year Lot Original Cost<br>Acquired                            | ion or construction-p                      | Amount Existin      | g Liens   (a) Pr              | esent Value of  | Lot j (b)                       | Cost of Improve  |                                  | Total (a + i |                       |                                      |           |
| \$ Complete this line if this is a !  | ofinance Ican                              | \$                  | \$                            | se of Refinance | s                               | 16               |                                  | \$           |                       |                                      |           |
| Year Original Cost  | miku ita itali.                            | Amount Existing     |                               | se or memnanci  | 9                               | Describe in      | nprovements                      | ' □ м        | ade 🗀                 | To be made                           |           |
| \$<br>Title will be held in what Name   | e(s)                                       | \$                  |                               |                 | Mannarin ud                     | Cost: \$         | h.11                             | I e          |                       |                                      |           |
|   |  |                     |                               |                 | Walter of Kit Wi                | ACT THE WIII DE  | neid                             |              | rill be ha<br>ee Simp |                                      |           |
| Source of Down Payment, Se  | ntement Charges an                         | nd/or Subordinate   | Financing (Explain            | n)              |                                 | -                |                                  |              | easehold              | 1                                    |           |
|   |  |                     |                               |                 |                                 |                  |                                  | 6            | Show exp              | oiration date)                       |           |
|   |  |                     | III. APPLICAN                 | IT INFORMA      | TION                            |                  |                                  | <u> </u>     |                       |                                      |           |
| Name (Include Jr. or Sr. if app   | Applicant #                                | <u> </u>            |                               | Name (Incl      | ude Jr. or Sr. if a             |                  | ant #2                           |              |                       |                                      |           |
| Social Security Number  | Home Phone (Incl.)                         | Area Code) Age      | Yrs. Scho                     | ol Social Secu  |                                 |                  | e (Inci. Area                    | Code)        | \ge                   | Yrs. School                          |           |
|   |  |                     | sted by Applicant #2          | ?) Marri        | ed Ur                           | married (Include | single, Depe                     | ndents (No   | t listed by           | (Applicant #1)                       |           |
| Present Address (Street, City,  |  | No. Ages            | No. Yrs                       |                 | arated din<br>ress (Street, Cit | rorced, widowe   | 1) No.                           | Ages         |                       |                                      |           |
| ,   | S,   |                     |                               | . Fresent Add   | ress (Street, Cit               | y, Siale, Zir)   | L Own                            | ' "          | ent                   | No. Yrs.                             |           |
|   |  |                     |                               |                 |                                 |                  |                                  |              |                       |                                      |           |
| If residing at present address<br>Former Address (Street, City,                                 |  | ars. complete the   |                               | Former Addr     | ess (Street, City               | State 7ID)       | Own                              | Re           |                       | No. Yrs.                             |           |
|   | _  |                     |                               |                 |                                 | , olulo, La )    |                                  | L            |                       | 140. 118.                            |           |
|   |  |                     |                               |                 |                                 |                  |                                  |              |                       |                                      |           |
| Former Address (Street, City,   | State, ZIP)                                | Wn Rent             | No. Yra                       | Former Addr     | ess (Street, City               | , State, ZIP)    | Own                              | □ Re         | ınt _                 | No. Yrs.                             |           |
|   |  |                     |                               |                 |                                 |                  |                                  |              |                       |                                      |           |
|   |  |                     |                               |                 |                                 |                  |                                  |              |                       |                                      |           |
|   |  |                     |                               |                 |                                 |                  |                                  |              |                       |                                      |           |
| Freddie Mac Form 65   |  |                     | Pag                           | e 1 of 8        |                                 |                  |                                  | Fa           | nnie Ma               | e Form 1003                          |           |
| riodale mae i omir do   | leduction Act of 199                       | 5, an agency ma     | y not conduct or s            | ponsor, and a   | person is not ar                | required to re   | spond to a c                     | ollection o  | f inform              | ation unless                         |           |
| According to the Paperwork I  |  | ша Оми сошто        | i numper for this             | Information c   | allection is (15)               | 5.0172 That      | MA PARVIER                       | d to come    | late thin             | information                          |           |
| According to the Paperwork I<br>it displays a valid OMB cont<br>collection is estimated to aver | rot number. Ine va<br>rage I- 1/2 hours pe | er response, incli  | ding the time for             | ic viewing man  |                                 |                  |                                  |              |                       |                                      | (see reve |
| According to the Paperwork I  | rot number. Ine va<br>rage I- 1/2 hours pe | er response, incli  | ding the time for<br>rmation. | reviewing man   |                                 |                  |                                  |              |                       |                                      | (333.313  |
| According to the Paperwork I<br>it displays a valid OMB cont<br>collection is estimated to aver | rot number. Ine va<br>rage I- 1/2 hours pe | er response, incli  | ding the time for<br>rmation. | reviewing man   |                                 |                  |                                  |              |                       |                                      | (000.000  |
| According to the Paperwork I<br>it displays a valid OMB cont<br>collection is estimated to aver | rot number. Ine va<br>rage I- 1/2 hours pe | er response, incli  | ding the time for rmation.    | eviewing man    |                                 | w                |                                  |              |                       |                                      |           |

PREPARED BY

: Applicant, in some cases with the assistance of contractors, builders, brokers and others. Loan origination office personnel will input data and generate form through UNIFI.

**NUMBER OF COPIES** 

: Original only.

SIGNATURES REQUIRED

: Original by applicant at application stage and updated form at loan closing.

**DISTRIBUTION OF COPIES** 

: Field office case file.

(09-30-98) PN 297

-2- (Forms Manual Insert - Form RD 410-4)

Used by field offices to obtain formal applications from persons seeking Rural Housing Loans/Grants. Forms may be given to contractors, builders, brokers and others who will assist borrowers in completing and filing the form with the field office. When necessary, field office employees should provide assistance in completing the form. The employee who receives the form from the borrower should make sure it is complete, properly signed, and dated.

The loan approval official will transfer an application to another field office jurisdiction when so requested by the borrower. The receiving loan approval official will enter the transferred application in his/her records as of the date received from the transferring office.

Both the borrower and co-borrower credit information should be furnished on one form. A separate application must be completed for any co-signer.

|   |                                  |                     | IV. EMP       | LOYMEN                         | T INFORMA        | TION                                |              |                  |  |
|---|----------------------------------|---------------------|---------------|--------------------------------|------------------|-------------------------------------|--------------|------------------|--|
|   | Applicant #1                     |                     |               |                                |                  |                                     | pplicant #2  |                  |  |
| Name & Address of Empl                              | oyer Sel                         | -Employed           | Yrs./Mos.     | on this job                    | Name & Add       | ress of Employer                    | Sel          | -Employed        | Yrs./Mos. on this job                                |
|   |                                  |                     | ine of work   | ployed in this<br>o'profession |                  |                                     |              |                  | Yrs/Mos, employed in this<br>line of work/profession |
| Position/Title/Type of Bus                          | iness                            | Business F          | hone (Incl.   | Area Code)                     | Position/Title   | Type of Business                    |              | Business F       | Hone (Incl. Area Code)                               |
| If employed in current pos                          | sition for less than two years   | or if current       | tly employs   | d in more I                    | than one noeiti  | ion complete the following          |              | <u> </u>         |  |
| Name & Address of Empl                              |                                  | -Employed           | Dates (F      |                                |                  | ess of Employer                     |              | f-Employed       | Dates (From To)                                      |
|   |                                  |                     |               |                                |                  |                                     |              |                  | 0.000 (1.000.10)                                     |
|   |                                  |                     | Monthle       | / Income                       | ł                |                                     |              |                  | Monthly Income                                       |
|   |                                  |                     | \$            | ,                              |                  |                                     |              |                  |  |
| Position/Title/Type of Busi                         | inare                            | Duringa E           |               | Ama Codal                      | Danition (Title) | Type of Business                    |              | louines 0        | S (feed Asso Confe)                                  |
| rosition ittertype of busi                          | 1 1022                           | Dusmess P           | Thorne (inca. | Prea Code)                     | Position/Title/  | Type of Business                    |              | Business         | thone (Incl. Area Code)                              |
| Name & Address of Emplo                             | over Sel                         | -Employed           | Dates (F      | rom Ta)                        | Name & Addr      | ess of Employer                     | □ Se         | !<br>If-Employed | Dates (From To)                                      |
|   | <i>,</i> — — —                   |                     | 1             |                                |                  |                                     |              |                  | 24.00 (7.0 10)                                       |
|   |                                  |                     | Monthly       | Income                         |                  |                                     |              |                  | Monthly Income                                       |
|   |                                  |                     | ١. '          |                                |                  |                                     |              |                  |  |
| Position/Title/Type of Busi                         | iness                            | Business F          | hone (Incl.   | Area Code)                     | Position/Title/  | Type of Business                    |              | Business P       | †hone (Incl. Area Code)                              |
|   |                                  |                     |               |                                |                  |                                     |              |                  | ,  |
|   |                                  |                     |               |                                |                  |                                     |              |                  |  |
|   | V. MONTH                         | I Y INCOM           | F AND C       | OMBINE                         | D HOUSING        | EXPENSE INFORM                      | ATION        |                  |  |
| Gross Monthly Income                                | Applicant #1                     | Applica             |               |                                | otal             | Combined<br>Monthly Housing Expense | Prese        | nt               | Proposed   |
| Base Empl. Income*                                  | \$                               | \$                  |               | 5                              |                  | Rent                                | \$           |                  |  |
| Overtima  |                                  |                     |               |                                |                  | First Mortgage (P&I)                |              |                  | \$   |
| Bonuses   |                                  |                     |               |                                |                  | Other Financing (P&I)               |              |                  |  |
| Commissions   |                                  |                     |               |                                |                  | Hazard Insurance                    |              |                  |  |
| Dividends/Interest                                  |                                  |                     |               |                                |                  | Real Estate Taxes                   |              |                  |  |
| Net Rental Income                                   |                                  |                     |               |                                |                  | Mortgage Insurance                  |              |                  |  |
| Other (Before completing                            |                                  |                     |               |                                |                  | Homeowner Assn. Dues                |              |                  |  |
| see the notice in "describe                         | 1                                |                     |               |                                |                  | Other                               |              |                  |  |
| see the notice in "describe<br>other income," below |                                  |                     |               | 1.5                            |                  |                                     |              |                  |  |
| other income," below<br>Total                       | \$<br>nt may be required to pro- | \$<br>ride addition | nai docum     | 7                              | uch as tax rei   | Total<br>turns and financial stat   | s<br>ements. | 1:               | \$   |
| other income," below<br>Total                       | nt may be required to pro-       | ride addition       | ort, or sepa  | entation s<br>vale maint       | tenence incon    |                                     | ements.      |                  | Monthly Amount                                       |
| Total  *Self Employed Applicer  Describe Other In   | nt may be required to pro-       | ride addition       | ort, or sepa  | entation s<br>vale maint       | tenence incon    | turns and financial stat            | ements.      |                  |  |
| Total  *Self Employed Applicer  Describe Other In   | nt may be required to pro-       | ride addition       | ort, or sepa  | entation s<br>vale maint       | tenence incon    | turns and financial stat            | ements.      |                  |  |
| Total  *Self Employed Applicer  Describe Other In   | nt may be required to pro-       | ride addition       | ort, or sepa  | entation s<br>vale maint       | tenence incon    | turns and financial stat            | ements.      |                  |  |
| Total  *Self Employed Applicer  Describe Other In   | nt may be required to pro-       | ride addition       | ort, or sepa  | entation s<br>vale maint       | tenence incon    | turns and financial stat            | ements.      |                  |  |
| Total  *Self Employed Applicer  Describe Other In   | nt may be required to pro-       | ride addition       | ort, or sepa  | entation s<br>vale maint       | tenence incon    | turns and financial stat            | ements.      |                  |  |
| Total  *Self Employed Applicer  Describe Other In   | nt may be required to pro-       | ride addition       | ort, or sepa  | entation s<br>vale maint       | tenence incon    | turns and financial stat            | ements.      |                  |  |
| Total  *Self Employed Applicer  Describe Other In   | nt may be required to pro-       | ride addition       | ort, or sepa  | entation s<br>vale maint       | tenence incon    | turns and financial stat            | ements.      |                  |  |
| Total  *Self Employed Applicer  Describe Other In   | nt may be required to pro-       | ride addition       | ort, or sepa  | entation s<br>vale maint       | tenence incon    | turns and financial stat            | ements.      | •                |  |
| Total  *Self Employed Applicer  Describe Other In   | nt may be required to pro-       | ride addition       | ort, or sepa  | entation s<br>vale maint       | tenence incon    | turns and financial stat            | ements.      | •                |  |
| Total  *Self Employed Applicer  Describe Other In   | nt may be required to pro-       | ride addition       | ort, or sepa  | entation s<br>vale maint       | tenence incon    | turns and financial stat            | ements.      | •                |  |
| Total  *Self Employed Applicer  Describe Other In   | nt may be required to pro-       | ride addition       | ort, or sepa  | entation s<br>vale maint       | tenence incon    | turns and financial stat            | ements.      | •                |  |
| Total  *Self Employed Applicer  Describe Other In   | nt may be required to pro-       | ride addition       | ort, or sepa  | entation s<br>vale maint       | tenence incon    | turns and financial stat            | ements.      | •                |  |
| Total  *Self Employed Applicer  Describe Other In   | nt may be required to pro-       | ride addition       | ort, or sepa  | entation s<br>vale maint       | tenence incon    | turns and financial stat            | ements.      | •                |  |
| Total  *Self Employed Applicer  Describe Other In   | nt may be required to pro-       | ride addition       | ort, or sepa  | entation s<br>vale maint       | tenence incon    | turns and financial stat            | ements.      | •                |  |
| Total  *Self Employed Applicer  Describe Other In   | nt may be required to pro-       | ride addition       | ort, or sepa  | entation s<br>vale maint       | tenence incon    | turns and financial stat            | ements.      | •                |  |
| Total  *Self Employed Applicer  Describe Other In   | nt may be required to pro-       | ride addition       | ort, or sepa  | entation s<br>vale maint       | tenence incon    | turns and financial stat            | ements.      | •                |  |
| Total  *Self Employed Applicer  Describe Other In   | nt may be required to pro-       | ride addition       | ort, or sepa  | entation s<br>vale maint       | tenence incon    | turns and financial stat            | ements.      | •                |  |

|   |                         |  | Completed Jointly                       | Not Jointly       |  |  |  |
|---|-------------------------|--|---|-------------------|--|--|--|
| ASSEYS Description  | Cash or Market<br>Value | Liabilities and Piedged Assets. List the creditor's name, address and account number for all curstanding debts, including automobile loans, revolving change accounts, real estate loans, alliency, citied apport, shock pledges, etc. Use continuation sheet, if necessary, includate by (?) those liabilities which will be satisfied upon sale oil real |   |                   |  |  |  |
| Cash deposit toward purchase held by:                                     | •                       | estate owned or upon refinancing of the subject prope  | Monthly Payment &<br>Months Left to Pay | Unpaid<br>Balance |  |  |  |
| List checking and saving accounts below                                   |                         | Name and Address of Company  | \$ Payment/Months                       | \$                |  |  |  |
| Name and Address of Bank, S&L, or Credit U                                | rion                    |  |   |                   |  |  |  |
|   |                         | Acct, No. Name and Address of Company  | \$ Payment/Months                       | \$                |  |  |  |
| Acct. No.   | \$                      |  | . ,                                     |                   |  |  |  |
| Name and Address of Bank, S&L. or Credit U                                | nion                    |  |   |                   |  |  |  |
|   |                         | Acct. No.  |   |                   |  |  |  |
|   |                         | Name and Address of Company  | \$ Paymen/Months                        | \$                |  |  |  |
| Acct No.  | s                       | _  |   |                   |  |  |  |
| Name and Address of Bank, S&L. or Credit U                                | nkon                    |  |   |                   |  |  |  |
|   |                         | Acct. No.  |   |                   |  |  |  |
|   |                         | Name and Address of Company  | \$ Payment/Months                       | \$                |  |  |  |
| Acct No.  | \$                      |  |   |                   |  |  |  |
| Name and Address of Bank, S&L. or Credit U                                | nion                    |  |   |                   |  |  |  |
|   |                         | Acct. No.  |   |                   |  |  |  |
|   |                         | Name and Address of Company  | \$ Payment/Months                       | \$                |  |  |  |
| Acct. No.   | \$                      | _  |   |                   |  |  |  |
| Stocks & Borkls (Company name/number<br>& description)                    | \$                      |  |   |                   |  |  |  |
|   |                         | Acct. No.  | <u> </u>                                |                   |  |  |  |
| Life insurance net cash value   | \$                      | Name and Address of Company  | \$ Payment/Months                       | \$                |  |  |  |
| Face amount: \$ Subtotal Liquid Assets                                    | s                       | _  |   |                   |  |  |  |
| Real estate owned (Enter market value from schedule of real estate owned) | \$                      | Acct. No.  |   |                   |  |  |  |
| Vested interest in retirement fund  | \$                      | Name and Address of Company  | \$ Payment/Months                       | s                 |  |  |  |
| Net worth of business(es) owned<br>(Attach financial statement)           | \$                      |  |   | -                 |  |  |  |
| Automobiles owned (Make and year)   | \$                      |  |   |                   |  |  |  |
|   |                         | Acct. No.  |   |                   |  |  |  |
|   |                         | Alimony/Child Support/Separate Maintenance<br>Payments Owed to:  | \$                                      |                   |  |  |  |
| Other Assets (Itemize)  | s                       | Job Related Expense (Child care, union dues, etc.)   | \$                                      |                   |  |  |  |
|   |                         | Total Monthly Payments   | \$                                      |                   |  |  |  |
| Total Assets a.   | \$                      | Net Worth: \$<br>(a minus b)   | Total Liabilities b.                    | \$                |  |  |  |
|   |                         |  |   |                   |  |  |  |
|   |                         |  |   |                   |  |  |  |

| Type of Property  Totals  Totals  y been receive | If you answer "Y continuation she a. Are there any c b. Have you beer transfer of this SBA loans, ho obligation, book you continuation of the same and the same a | es" to any questic<br>set for explanation<br>ubstanding judgmen<br>discharged in ban<br>to a lawaui?<br>city or indirectly be<br>in fleu of forectoes<br>no improvement loans<br>of or hose guestical  | VIII. DECL/ one a through j, p, nhis against you? nkruptcy within the  | S  ARATIONS Ilense use past 7 years?  y loan in the last? (This world included income of the control of the con | such loans as ho<br>ile) horne loans, an   | \$ Applicant #2 o Ves No Retail in foreclosure recovering page Apres or |
|--|--|--|--|--|--|--|
|  | # d and Indicate ap<br>Craditor N<br>Craditor N<br>Tontinuation sh<br>a. Are there arry c<br>b. Have you dent<br>transfer of till<br>SBA loans, ho<br>obligation, boo<br>VA. case nam.   | s" to any question of the control of | VIII. DECLI ons a through j. p. ents against you? skruptcy within the  | SOUNT NUMBER(s): ACATIONS Ilense was past 7 years?  y loan in the last? (This would include involved include involved include involved include involved include involved include involved involv | Applicant Yes N.  yosis which resus such brains as ho  | \$9 Applicant #2  o Yes No  line in foreclosure research (page 4 base)  Red in foreclosure research (page 4 base)  |
|  | If you answer "Y continuation sho a. Are there any c b. Have you beer t. Are you a party d. Have you der transfer of its SSA loans, ho obligation, book you continuation should be something that the state of the st | es" to any question set to any question to any question to any question to a lawaut?  City or indirectly be as in fleu of force are in fleu of the any and any and any and any   | VIII. DECLI ons a through j. p. ents against you? skruptcy within the  | SOUNT NUMBER(s): ACATIONS Ilense was past 7 years?  y loan in the last? (This would include involved include involved include involved include involved include involved include involved involv | Applicant Yes N.  yosis which resus such brains as ho  | \$9 Applicant #2  o Yes No  line in foreclosure research (page 4 base)  Red in foreclosure research (page 4 base)  |
|  | If you answer "Y continuation sho a. Are there any c b. Have you beer t. Are you a party d. Have you der transfer of its SBA loans, ho obligation, book you continuation should be successful to the state of the sta | es" to any question set to any question to any question to any question to a lawaut?  City or indirectly be as in fleu of force are in fleu of the any and any and any and any   | VIII. DECLJ ons a through j, p, h, ents against you? skruptcy within the   | ARATIONS lease use past 7 years? y loan in the last? (This would include   | Applicant Yes N.  yosta which resus such brans as ho   | #93 Applicant #2  o Yes No  Red in foreclosure me mortgage foams  (mortgage foams)   |
|  | If you answer "Y continuation sho a. Are there any c b. Have you beer t. Are you a party d. Have you der transfer of its SBA loans, ho obligation, book you continuation should be successful to the state of the sta | es" to any question set to any question to any question to any question to a lawaut?  City or indirectly be as in fleu of force are in fleu of the any and any and any and any   | VIII. DECLJ ons a through j, p, h, ents against you? skruptcy within the   | ARATIONS lease use past 7 years? y loan in the last? (This would include   | Applicant Yes N.  yosta which resus such brans as ho   | #93 Applicant #2  o Yes No  Red in foreclosure me mortgage foams  (mortgage foams)   |
|  | If you answer "Y continuation sho a. Are there any c b. Have you beer t. Are you a party d. Have you der transfer of its SBA loans, ho obligation, book you continuation should be successful to the state of the sta | es" to any question set to any question to any question to any question to a lawaut?  City or indirectly be as in fleu of force are in fleu of the any and any and any and any   | VIII. DECLJ ons a through j, p, h, ents against you? skruptcy within the   | ARATIONS lease use past 7 years? y loan in the last? (This would include   | Applicant Yes N.  yosta which resus such brans as ho   | #93 Applicant #2  o Yes No  Red in foreclosure me mortgage foams  (mortgage foams)   |
|  | If you answer "Y continuation sho a. Are there any c b. Have you beer t. Are you a party d. Have you der transfer of its SBA loans, ho obligation, book you continuation should be successful to the state of the sta | es" to any question set to any question to any question to any question to a lawaut?  City or indirectly be as in fleu of force are in fleu of the any and any and any and any   | VIII. DECLJ ons a through j, p, h, ents against you? skruptcy within the   | ARATIONS lease use past 7 years? y loan in the last? (This would include   | Applicant Yes N.  yosta which resus such brans as ho   | #93 Applicant #2  o Yes No  Red in foreclosure me mortgage fears  (mortgage fears)   |
|  | If you answer "Y continuation sho a. Are there any c b. Have you beer t. Are you a party d. Have you der transfer of its SBA loans, ho obligation, book you continuation should be successful to the state of the sta | es" to any question set to any question to any question to any question to a lawaut?  City or indirectly be as in fleu of force are in fleu of the any and any and any and any   | VIII. DECLJ ons a through j, p, h, ents against you? skruptcy within the   | ARATIONS lease use past 7 years? y loan in the last? (This would include   | Applicant Yes N.  yosta which resus such brans as ho   | #93 Applicant #2  o Yes No  Red in foreclosure me mortgage fears  (mortgage fears)   |
|  | If you answer "Y continuation sho a. Are there any c b. Have you beer t. Are you a party d. Have you der transfer of its SBA loans, ho obligation, book you continuation should be successful to the state of the sta | es" to any question set to any question to any question to any question to a lawaut?  City or indirectly be as in fleu of force are in fleu of the any and any and any and any   | VIII. DECLJ ons a through j, p, h, ents against you? skruptcy within the   | ARATIONS lease use past 7 years? y loan in the last? (This would include   | Applicant Yes N.  yosta which resus such brans as ho   | #93 Applicant #2  o Yes No  Red in foreclosure me mortgage fears  (mortgage fears)   |
| y baen racelve                                   | If you answer "Y continuation she a. Are there any c b. Have you beer transfer of this SBA loans, ho obligation, book you continuation of the state  | es" to any questic<br>set for explanation<br>utstanding jurgme<br>discharged in ban<br>to a lawaui?<br>city or indirectly be<br>si in flau of foreigners<br>are in flau of foreigners and  | VIII. DECLI<br>ons a through j, p.<br>h.<br>ents against you?<br>skruptcy within the<br>sen obligated on an<br>sure, or judgmen!?<br>se odcolone! fears. | ARATIONS lease use past 7 years? y loan in the last? (This would include involved include involved include involved include involved include involved include involved involve | Applicant Yee N.  Yes IV.  Yes | Yes No   |
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|  | c. Are you a party<br>d. Have you dire<br>transfer of titl<br>SBA loans, how<br>obligation, born<br>V.A. case num  | to a lawsuit?<br>actly or indirectly be<br>in lieu of foreclos-<br>ne improvement toan<br>d, or loan guarantee.  | en obligated on an<br>sure, or judgment?<br>is, educational loans.   | y loan in the last 7<br>(This would include<br>manufactured (mob   | such loans as ho<br>ile) horne loans, an   | ms mortgage loans,<br>v mortgage, financia   |
|  | d. Have you die<br>transfer of titl<br>SBA loans, hot<br>obligation, bon<br>VA. case num   | ictly or indirectly be<br>in lieu of foreclos-<br>ne improvement loan<br>d, or loan guarantee.   | ture, or judgment?<br>18. educational loans.   | (This would include<br>manufactured (mob   | such loans as ho<br>ile) horne loans, an   | ms mortgage loans,<br>v mortgage, financia   |
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|  | transfer of titl<br>SBA loans, hos<br>obligation, bon<br>V.A. case num   | s in fleu of forectos:<br>ne improvement loan:<br>d, or kvan guarantee.  | ture, or judgment?<br>18. educational loans.   | (This would include<br>manufactured (mob   | such loans as ho<br>ile) horne loans, an   | ms mortgage loans,<br>v mortgage, financia   |
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|  | V.A. case num  | u, ur kvam guarantee.<br>Noor if oner endrosen   |  |  |  |  |
|  |  |  | ons for the action.)   | ums, including date.   | . name, and addres   | S Of Lender, FHA of  |
|  |  | ntly delinquent or in o  |  | rel done or now otho   | اللا   |  |
|  | mortgage, fina   | neral obligation, bone   | id, or loan guarantes  | ? If "Yes," pive deta  | kioaus<br>Mesas  | l l  |
|  | described in d   | above.   | -  |  |  |  |
|  | f. Are you oblig   | ated to pay alimony  | y, child support, or   | separate mainten   | ance?  | 7177   |
|  |  | the down payment   |  |  |  | TI   |
|  |  | maker or andorser  |  |  |  | =1 === ==  |
|  | i. Are you a U.S   |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  | manent resident ali  |  |  |  |  |
|  | <li>k. Do you intend<br/>if "Yes," comp</li>   | to occupy the prop<br>lete question !. belo  | perty as your prima<br>low.  | ry residence?  |  |  |
|  |  | lownership interes   |  |  |  |  |
|  | or investm   | of property did you own<br>ent property (IP)?  |  |  |  | -  |
|  | (2) How did yo   | whold take to the hom<br>P), or jointly with and   | me-solely by yoursel<br>other person (0)?  | f (S). jointly with yo   | ur   | -  |
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|  |  | IX. ACKNOWLEDGM   |   |  |  |   |
|--|--|---|---|--|--|---|
| The undersigned specifically achieven; (2) the property will not indicated herein; (4) occupation contained in the application may name in this application, and trassigns will rely on the information of the material facts which I have Lender, its agents, successors constaining of the lorn tray be in successor or assign of the Lender of the lorn tray be in successor or assign of the Lender of the lorn tray be increased; and the lorn contribution of the lorn tray between the lorn tray that the inturnesstanding that any intention not limited to, the or imprison successors and easigns, insured.  | se used for any illegal or<br>of the property will be as<br>be made at any time by<br>se original copy of this as<br>on contained in the applic<br>e represented herein sho<br>and assigns, may, in add<br>naferred to successor or<br>er with prior notice to me<br>rify, the condition of the pro-<br>portion of the properties of the<br>portion of the pro-<br>portion of the properties of the<br>properties of the pro-<br>portion of the pro- | prohibited purpose or use: (i indicated in Section il Prog-<br>the Lender, its agents, succolication will be retained by<br>attion and i have a continuing<br>util charge prior to losking; it<br>tion to all their other rights assign of the Lender without<br>(9) the Lender, its agents, soperty, or the value of the praphilation is true and corre-<br>pantiation is true and corre-<br>vations of the information co-<br>prosions of Title 18. United S. | (3) all statements mucessors and assigns the Lender, even if g obligation to amen (7) in the event payr and remedies, reaching the successors and assigned to the date seintained in this application of the date seintained in this application. | de in this application<br>in Purpose of Loan:<br>either directly or the<br>the loan is not applied<br>and/or supplement<br>ents on the loan in<br>the administration<br>gns make no represormant<br>forth opposite my<br>sation may result in<br>1901, and liability | on are made for the<br>(5) verification or re<br>prough a credit repo-<br>rowed; (6) the Lend<br>in the information pro-<br>dicated in this applicated<br>in the loan account or<br>antations or warrant<br>signature on this ap-<br>cival liability and/or cor<br>for monetary dama | purpose of obtaining the loverification of any informati-<br>verification of any informati-<br>riting agency, from any sour<br>ar, its agents, successors a<br>wided in this application it a<br>sation become delinquent, it<br>a credit reporting agency;<br>(asy be transferred to an age<br>less, express or implied, to bi-<br>olication and acknowledge or<br>iminal penalties including, to<br>get to the Lender, its agen |
| Applicant's Signature  |  | Date  | Applicant's Sign  | ature  |  | Date  |
| x  |  |   | x   |  |  |   |
|  | X. INFO  | RMATION FOR GOVER   | NMENT MONITO  | RING PURPOSE   | S  |   |
| opporturity, fair housing and no neither discriminate on the basin required to note race and sex or the above material to assure the APPLICANT #1  Race/National Origin: I do not w American (Select (Select Black or Black | s of this information, nor<br>the basis of v.sual obser<br>if the disclosures satisfy a<br>shite turnish this information<br>notion  | on whether you choose to fu<br>vation or surname, if you do a<br>all requirements to which the<br>Native Hawaiian or<br>Other Pacific Islande   | urnish it. However, if<br>not wish to furnish th<br>Lender is subject u<br>APPLICANT #1<br>Race/National  | you choose not to be above information ander applicable staff  I do not wish American India or Alaska Natio (not Alaskan)  Black or  | iumish it, under Fed, please check the be law for the particulate to furnish this Information Asiar.   | eral regulations this Lender ox below. (Lender must revi<br>lar type of loan applied for.)  on  Native Hawaiian or Other Pacific Islam  |
| more) African Ar   |  |   | more)   | Atrican Americ  Other (Specify   |  |   |
| Sex: Female  | Male   |   | Sex:  | Female   | Male   |   |
| To be Completed by Interview   | er interviewer's Na  | me (Print or type)  |   | Name and Addr  | ss of Interviewer's E  | mployar   |
| This application was taken by: tace-to-face interview by mail by telephone   | Interviewers Sig   | nature<br>ne Number (Incl. Area Code)   | Date  | _  |  |   |
| Continuation F   | or/Decident  | ial Loan Anni   | lication  |  |  |   |
| Use if you need more space to complete the Residential Loan  | Applicant#1 (A1)   | iai Edan Appi   | noution   |  | Agency Accou   | int Number:   |
| Application Mark A1 for Applicant<br>or A2 for Applicant #2  | Applicant #2 (A2)  |   |   |  | Lender Accou   | nt Number:  |
|  |  |   |   |  |  |   |
| Freddie Mac Form 65  |  | Pa  | nge 5 of 8  |  |  | Fannie Mae Form 1   |

|   | Section 50   |  | Loan Grant   |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|--|
| APPLICANT #1  |  |  |  | APPLICANT #2   |  |  |  |  |  |
| 2. Have you ever obtained a loan/grant fro  | m RHS?   |  | ***  | Have you ever obtained a loar/grant from RHS?  |  |  |  |  |  |
| Yes No  |  |  |  | Yes  | No   |  |  |  |  |
| Are you a relative to an RHS Employee   | or Closing   | agent/attome   | 9 <b>y</b> ?   |  | tive to an RHS Employee or Clos  | ing agent/attom  | ey?  |  |  |
| Yes No No   |  |  |  | Yes<br>If yes, who   | ] No [   |  |  |  |  |
| if yes, who?  |  |  |  | Relationsh   |  |  |  |  |  |
| Are you a Veteran? Yes N  |  |  |  | 7. Are you a Vete  | <u> </u>   | 1  |  |  |  |
| Complete for all nousehold members w  | ho are 18  | ears of age o  | or older.  |  |  |  | · · · · · · · · · · · · · · · · · · ·  |  |  |
| o be considered eligible for assistance, a  | .,   |  |  |  | +  | 1  |  |  |  |
| Name  | Age  | Are you a full time student? y/n   | Do you want to be con-<br>sidered for an adjustment<br>from household income<br>because of a disabling<br>condition? y/n   | Annual<br>Wage<br>Income   | Source of Wage income<br>(employer)  | Annual<br>Non-Wage<br>Income   | Source of Non-Wage<br>Income (social security,<br>allimony, child support,<br>etc.)  |  |  |
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| 9. Child Care (Minors who are 12 years of   |  |  |  | r or leave at a chil   | la care center)  |  |  |  |  |
| Child Care (Minors who are 12 years of Cost per week \$   |  | fer for whom<br>as per month   |  | r or leave at a chif   | la care conter)  |  |  |  |  |
| Cost per week \$  10. Characteristics of Present Housing  |  |  |  | r or leave at a chit   | la care center)  | <u> </u>   |  |  |  |
| Cost per week \$  |  |  |  | r or leave at a chit   | la care center)  |  |  |  |  |
| Cost per week \$  10. Characteristics of Present Housing  Does the Dwelling:  Yes  Lack complete plumping   | lo PH  | st per month   | jorated or structurally unsou  | Yes No   | la care center)  |  |  |  |  |
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-8- (Forms Manual Insert - Form RD 410-4)

|   |   | and the state of t |  |
|---|---|--|--|
|   | he Federal Equal Credit Opportunity Act prohibits<br>status, age (provided that the applicant has the capa      |  |  |
| from any public assistance :  |   | ony to siller with a britaing contract); or beca   | use all of part of the applicant's licome derives  |
| Department of Agriculture re  | gulations provide that no agency, officer, or employe   | e of the United States Department of Agricult  | ture shall exclude from participation in, deny the |
| benefits of, or subject to disc   | crimination any person on the basis of race, color, re  | iligion, sex, age, handicap, or national origin  | under any program or activity administered by      |
|   | oyee.The Fair Housing Act prohibits discrimination in   |  |  |
|   | handicap, familial status, or national origin. If you   | believe you have been discriminated again:   | st for any of these reasons, you can write the     |
| Secretary of Agriculture, Wa  | smington, D.C. 20250.   |  |  |
|   | loan because you in good faith exercised your righ  |  |  |
|   | he Federal Trade Commission, Washington, D.C. 205   |  |  |
|   | ended, declared ineligible, or voluntarily excluded fr  |  |  |
|   | roposal been convicted or had a civil judgment rend<br>irming a public (Federal, state, or local) transaction o |  |  |
|   | records, making false statement, or receiving stoler  |  |  |
|   | in any Federal court other than the United States T   |  |  |
| (including any Federal agen   |   |  | •  |
|   | Opportunity Act prohibits creditors from discrimine   |  |  |
|   | s, age (provided the borrower nas the capacity to en  |  |  |
| public assistance program, o  | or because the borrower has in good faith exercised   | any right under the Consumer Credit Protec   | tion Act.  |
| 4. AM unable to provide the hou   | sing I need on my own account, and I am unable to secu  | on the credit names are for this representation of   | her courses upon larms and conditions which I      |
|   | he statements made by me in this application are true, o  |  |  |
|   |   |  |  |
|   | ROM PARTICIPATION IN ALL FEDERAL PR   | OGRAMS UNDER 7 C.F.R. PART 301   | 7.   |
| ate   |   | Signature of Applicant   |  |
|   |   | x  |  |
| ate   |   | Signature of Applicant   |  |
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|   |   |  |  |
|   |   | Determination of FRUIT Re-   |  |
| 5. Date   | Signature of Loan Approval Official   | Determination of Eligibility   | Racial Data Provided by                            |
| i. Date   | Signature of Loan Approval Official   | Eligible Not Eligible  | Racial Data Provided by  Applicant RHS             |
|   | Signature of Loan Approval Official   |  | 1  |
| Application received on   | Signature of Loan Approval Official   |  | 1  |
| Application received on  Application complete on  | Signature of Loan Approval Official   |  | 1  |
| Application received on     Application complete on      Credit Report Fee                    |   |  | 1  |
| Application received on Application complete on      Credit Report Fee Date Received:         | Signature of Loan Approval Official  Amount Received: \$  |  | 1  |
| 5. Application received on Application complete on 7. Credit Report Fee                       |   |  | 1  |
| Application received on Application complete on      Credit Report Fee     Date Received:     |   |  | 1  |
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| . Application received on   |   |  | 1  |

#### NOTICE TO APPLICANT REGARDING PRIVACY ACT INFORMATION

The information requested on this form is authorized to be collected by the Rural Housing Service (RHS), Rural Business-Cooperative Services (RBS), Rural Utilities Service (RRIS) or the Farm Service Agency (FSA) ("the agency") by title V of the Housing Act of 1949, as amended (42 U.S.C. 1271 et seq.) or by the Consolidated Farm and Rural Development Act (7 U.S.C. 1271 et seq.), or by other laws administered by RHS, RBS.

Disclosure of information requested is voluntary. However, failure to disclose certain items of information requested, including your Social Security Number or Federal Identification Number, may result in a delay in the processing of an application or its rejection. Information provided may be used outside of the agency for the following purposes:

- 1. When a record on its face, or in conjunction with other records, indicates a violation or potential violation of law, whether civil, criminal or regulatory in nature, and whether arising by general statute or particular program statute, or by regulation, rule, or order issued pursuant thereto, disclosure may be made to the appropriate agency, whether Federal, foreign, state, local, or tribal, or other public authority responsible for enforcing, investigating or prosecuting such violation or charged with enforcing or implementing the statute, or rule, regulation, or order issued pursuant thereto, if the information disclosed is relevant to any enforcement, regulatory, investigative, or prosecutive responsibility of the receiving entity.
- 2. A record from this system of records may be disclosed to a Member of Congress or to a Congressional staff member in response to an inquiry of the Congressional office made at the written request of the constituent about whom the record is maintained.
- 3. Disclosures may be made of names, home addresses, social security numbers, and financial information to business firms in a trade area that buy chattel or crops or sell them for commission. This is in order that the agency may benefit from the purchaser notification provisions of section 1324 of the Food Security Act of 1985 (7 U.S.C. 163(c)). The Act requires that potential purchasers of farm commodities must be advised ahead of time that a Een exists in order for the creditor to perfect its lien against such purchases.
- 4. Disclosures may be made from this system to consumer reporting agencies as defined in the Fair Credit Reporting Act (15 U.S.C. 1681a(f)) of the Federal Claims Collection Act (31 U.S.C. 3701(a)(3)).
- 5. Disclosure of the name, home address, and information concerning default on loan repayment when the default involves a security interest in tribal allotted or trust land. Pursuant to 42 U.S.C. 1479(d), liquidation may be pursued only after offering to transfer the account to an eligible tribal member, the tribe, or the Indian Housing Authority serving the tribe(s).
- Referral of names, home addresses, social security numbers, and financial information to a collection or servicing contractor, financial institu-tion, or a local. State, or Federal agency, when the agency determines such referral is appropriate for servicing or collecting the borrower's account or has provided for in contracts with servicing or collection agencies.
- 7. It shall be a routine use of the records in this system of records to disclose them in a proceeding before a court or adjudicative body, when: (a) the agency or any component thereof; or (b) any employee of the agency in his or her official capacity; or (c) any employee of the agency in his or her individual capacity where the agency has agreed to represent the employee, or (d) the United States is a party to litigation or has an interest in such litigation, and by careful review, the agency determines that the records are both relevant and necessary to the litigation, provided, however that in each case, the agency determines that disclosure of the records is a use of the information contained in the records that is compatible with the purpose for which the agency collected the records.
- Referral of name, home address, and financial information for selected borrowers to financial consultants, advisors, lending institutions, packagers, agents, and private or commercial credit sources, when the agency determines such referral is appropriate to encourage the borrower to refinance their RHS indebtedness as required by title V of the Housing Act of 1949, as amended (42 U.S.C. 1471).
- Referral of legally enforceable debts to the Department of the Treasury, Internal Revenue Service (IRS), to be offset against any tax refund that a become due the debtor for the tax year in which the referral is made, in accordance with the IRS regulations and under the authority contained in 31 U.S.C. 3720A
- 10. Referral of information regarding indebtedness to the Defense Manpower Data Center, Department of Defense, and the United States Postal Service for the purpose of conducting computer matching programs to identify and locate individuals receiving Federal salary or benefit payments and who are delinquent in their repayment of debts owned to the U.S. Government under certain programs administered by the agency in order to collect debt under the provisions of the Debt Collection Act of 1982 (5 U.S.C. 5514) by voluntary repayment, administrative or salary offset procedures, or by collection agencies.
- 11. Referral of names, home addresses, and financial information to lending institutions when the agency determines the individual may be financially capable of qualifying for credit with or without a guarantee.
- 12 Disclosure of names, home addresses, social security numbers, and financial information to lending institutions that have a lien against the same property as the agency for the purpose of the collection of the debt by the agency or the other lender. These loans can be under the direct and guaranteed loan programs
- 13. Referral to private attorneys under contract with either the agency or with the Department of Justice for the purpose of foreclosure and possession actions and collection of past due accounts, in connection with the agency.
- 14. It shall be a routine use of the records in this system of records to disclose them to the Department of Justice when: (a) The agency or any 14. It shall be a routine use of the records in this system of records of discusse them to the Department of Justice has agreed or any component thereof, or (b) any employee of the agency in his or her official capacity where the Department of Justice has agreed to represent the employee, or (c) the United States Government, is a party to litigation or has an interest in such litigation, and by careful review, the agency determines that the records are both relevant and necessary to the litigation and the use of such records by the Department of Justice is therefore deemed by the agency to be for a purpose that is compatible with the purpose for which the agency collected the records.
- Referral of names, home addresses, social security numbers, and financial information to the Department of Housing and Urban Development (HUD) as a record of location utilized by Federal agencies for an automatic credit prescreening system.
- 16. Referral of names, home addresses, social security numbers, and financial information to the Department of Labor, state wage information collection agencies, and other Federal, state, and local agencies, as well as those responsible for verifying information furnished to qualify for Federal benefits, to conduct wage and benefit matching through manual or automated means, for the purpose of determining compliance with Federal regulations and appropriate servicing actions against those not entitled to program benefits, including possible recovery of Improper benefits.
- 17. Referral of names, home addresses, and financial information to financial consultants, advisors, or underwriters, when the agency determines such referral is appropriate for developing packaging and marketing strategies involving the sale of agency loan assets.

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Form RD 410-4

#### INSTRUCTIONS FOR PREPARATION

System generated through UNIFI.

### **Instructions for completing Pages 1-5 of the URLA:**

#### I. TYPE OF MORTGAGE AND TERMS OF LOAN

Mortgage Applied for: RHS

Agency Case Number: Leave blank Lender Case Number: Leave Blank

Amount: Mortgage amount requested, if known

Interest Rate: The rate in effect at time of loan application (provided by Agency)

No of Months: Term of loan in months

Amortization type: Fixed rate

### II. PROPERTY INFORMATION AND PURPOSE OF LOAN

Complete this section, except the Purpose of Loan area, only if there is a sales contract. The Real Estate Agent can provide most of the requested information. The Purpose of the Loan section must always be completed.

Subject Property Address: Complete only if known at time of application

No. of Units: 1

Legal Description of Subject Property: If known at time of application

Year Built: If known at time of application

Purpose of Loan: Purchase, or if there is a contract to build a home, Construction; For repair

loans, the "OTHER" block should be marked and repairs listed as explanation

Property will be: Primary residence

Complete the construction line only if purpose is construction

Refinance: Complete, as appropriate
Title will be held: Complete, as appropriate

Manner in which Title will be held: Complete, as appropriate

Estate will be held: Complete, as appropriate

Source of Downpayment: If none required leave blank

#### III. BORROWER INFORMATION

Information must be provided for borrower(s). If the borrowers are married all dependents living in the household should be listed in the "borrower" category. If the borrowers are not married, list dependents as appropriate. The names and ages of the dependents can be listed separately or on the bottom of page 5.

The "Present Address" section should list the name and address of the current landlord. The "Former Address" area should contain the name and address of the former landlord, as necessary.

#### IV. EMPLOYMENT INFORMATION

Information must be provided for both the borrowers. Employment information for all adults in the household should be provided on the "Continuation Section" on page 5.

### V. MONTHLY INCOME AND COMBINED HOUSING EXPENSE INFORMATION

Complete as instructed. However, Agency regulations require the disclosure of all household income including alimony, child support. and separate maintenance income in order to determine eligibility for payment assistance.

### VI. ASSETS AND LIABILITIES

List assets for the applicant(s). If an asset belongs to only one, identify who it belongs to by a AI for applicant # 1 or A2 for applicant #2.

List liabilities for the applicant(s). If a liability belongs to only one, identify who it belongs to by a Al for applicant #1 or A2 for applicant #2.

If there are no assets or liabilities, indicate none.

#### VII. DETAILS OF TRANSACTION

Complete a. through c. only if a sales contract has been written for a property prior to loan application. The Real Estate Agent can provide assistance.

### VIII. DECLARATIONS

Complete as instructed. All "yes" answers to questions a. through j. require an explanation on page 5.

#### IX. ACKNOWLEDGMENT AND AGREEMENT

Complete this section as instructed. The "To be Completed by Interviewer" portion is completed by the RHS staff or packagers.

## Page 5 - Continuation Section/Residential Loan Application

If applicable, complete name and Social Security number of all the dependents. Complete all other additional information, as indicated previously.

# INSTRUCTIONS FOR COMPLETING THE ADDITIONAL INFORMATION REQUIRED ON THE RHS SECTION

## Pages 6-7 ADDITIONAL INFORMATION REQUIRED FOR RHS ASSISTANCE

- 1. Indicate loan type.
- 2. 7. Completed by the applicant(s). \*Use item or block to designate what is being completed.

-12- (Forms Manual Insert - Form RD 410-4) 8. Complete the information for all persons who will be living in the household who are 18 years old

and over. 9. List all applicable child care costs.

Complete the information about the condition of the current housing.

11. For Section 504 grants only.

Read the statements. If there are any questions or concerns the field office staff can provide additional information and/or an explanation. 13. - 14. The statements should be read and then the borrowers must sign and date. The application is

signed in two places. The first signature on the URLA and the second one on the Additional RHS

Information (Addendum) portion.

10.

12.

15. - 17. To be completed by RHS staff.